## ...FORM D

1397663

**UNITED STATES** SECURITIES AND EXCHANGE COMMISSION

# Washington, D.C. 20549

OMB Number: 3235-0076 Expires: April 30, 2008 Estimated average burden hours per response:

16.00

OMB APPROVAL



## FORM D NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

SEC USE ONLY						
Prefix		Serial				
DATE RECEIVED						

	<u> </u>
Name of Offering (☐ check if this is an amendment and name has changed, and indicate change.)	
Goldman Sachs Select Fund, Ltd.: Shares	
Filing Under (Check box(es) that apply): ☐ Rule 504 ☐ Rule 505 ☑ Rule 506	☐ Section 4(6) ☐ ULOE
Type of Filing: ☐ New Filing ☑ Amendment	
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)	
Goldman Sachs Select Fund, Ltd.	
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (including Area Code)
c/o Goldman Sachs Hedge Fund Strategies LLC, 701 Mount Lucas Road, Princeton, New	v (609) 497-5500
Jersey 08540	MAIL
Address of Principal Business Operations (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
(if different from Executive Offices)	May
Brief Description of Business	16 2007
To operate as a private investment fund.	(00)
To operate as a private investment rand.	
Type of Business Organization	DDOOF OOF
☐ corporation ☐ limited partnership, already formed	other (please specify): PROCESSEI
☐ business trust ☐ limited partnership, to be formed	Exempted Limited Company
	<u>MAY 2.5</u> 2007
· Month Year	☑ Actual ☐ Estimated ✓THOMSON
Actual or Estimated Date of Incorporation or Organization: 0 1 0 7	Actual Estimated THOMSON
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbrevia	ation for
State: CN for Canada; FN for other foreign ju	
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#### GENERAL INSTRUCTIONS

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

### ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collections of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

A. BASIC IDENTIFICATION DATA									
2. Enter the information requested for the following:									
* Each promoter of the issuer, if the issuer has been organized within the past five years;									
* Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;									
* Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and									
* Each general and managing partner of partnership issuers.									
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☑ General and/or Managing Partner									
Full Name (Last name first, if individual)									
Goldman Sachs Hedge Fund Strategies LLC (the Issuer's Investment Manager)									
Business or Residence Address (Number and Street, City, State, Zip Code)									
701 Mount Lucas Road, Princeton, New Jersey 08540									
Check Box(es) that Apply:  Promoter  Beneficial Owner  Executive Officer  Director*  General and/or  *of the Issuer's Investment Manager  Managing Partner									
Full Name (Last name first, if individual)									
Barbetta, Jennifer									
Business or Residence Address (Number and Street, City, State, Zip Code)									
c/o Goldman Sachs Hedge Fund Strategies LLC, 32 Old Slip, New York, New York 10005									
Check Box(es) that Apply:  Promoter  Beneficial Owner  Executive Officer  Director*  General and/or  *of the Issuer's Investment Manager  Managing Partner									
Full Name (Last name first, if individual)									
Clark, Kent A.									
Business or Residence Address (Number and Street, City, State, Zip Code)									
c/o Goldman Sachs Hedge Fund Strategies LLC, One New York Plaza, New York, New York 10004									
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☑ Director* ☐ General and/or *of the Issuer's Investment Manager Managing Partner									
Full Name (Last name first, if individual)									
Lawson, Hugh J.									
Business or Residence Address (Number and Street, City, State, Zip Code)									
c/o Goldman Sachs Hedge Fund Strategies LLC, One New York Plaza, New York, New York 10004									
Check Box(es) that Apply:									
Full Name (Last name first, if individual)									
Business or Residence Address (Number and Street, City, State, Zip Code)									
Check Box(es) that Apply:									
Full Name (Last name first, if individual)									
Business or Residence Address (Number and Street, City, State, Zip Code)									
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner									
Full Name (Last name first, if individual)									
Business or Residence Address (Number and Street, City, State, Zip Code)									
(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)									

<u></u>				B. INI	ORMAT	ION ABC	UT OFFI	ERING				
****										=	Yes	No
1. Has.th	e issuer solo	i, or does th	e issuer inte	end to sell,	to non-accre	edited inves	tors in this (	offering?				☑
			A	ınswer also	in Appendi	x, Column	2, if filing u	inder ULOE	<b>.</b>			
2. What is the minimum investment that will be accepted from any individual?							\$1,000,000*					
*The Issue 3. Does to	er, in its sol	le discretion permit joint	n, may acce ownership	pt subscrip	otions below	w the minin	num.				Yes ☑	No
	•	·	ted for eacl	_								
commi	ssion or sin	nilar remun	eration for s	olicitation	of purchases	rs in connec	ction with sa	ales of secu	rities in the	offering.		
If a per	rson to be li	sted is an a	ssociated pe	rson or age	nt of a brok	er or dealer	registered	with the SE	C and/or wi	th a state		
			broker or de et forth the i					a are associ	ateu person	s or such		
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Full Name	: (Last name	tirst, if ind	ividual)									
Business of	or Residence	e Address (1	Number and	Street, City	y, State, Zip	Code)						
Name of A	Associated E	Proker or De	ealer			<del></del>						
Name of 7	issociated L	JOKEI OF DA	Luici									
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Business of	or Residence	e Address (l	Number and	Street, Cit	y, State, Zip	Code)		•	_		•	
Name of A	Associated E	Broker or De	ealer						· · · · · ·			-
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[TN] [TX] [UT] [VT] [VA] [WA] [WV] (Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

## C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box   and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.				
	Type of Security		Aggregate Offering Price		Amount Already Sold
	Debt	\$_	0	\$	0
	Equity (Shares)	\$_	23,000,000	\$	23,000,000
	☑ Common □ Preferred				
	Convertible Securities (including warrants)	<b>\$</b> _	0	\$	0
	Partnership Interests	<b>\$</b> _	0	\$	0
	Other (Specify)	<b>\$</b> _	0	\$	0
	Total	\$_	23,000,000	\$	23,000,000
	Answer also in Appendix, Column 3, if filing under ULOE.				
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."				Aggregate
			Number Investors		Dollar Amount of Purchases
	Accredited Investors		11	\$	23,000,000
	Non-accredited Investors	_	0	\$	0
	Total (for filings under Rule 504 only)	_	N/A	\$	N/A
	Answer also in Appendix, Column 4, if filing under ULOE.				
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.				
	Type of offering		Type of Security		Dollar Amount Sold
	Rule 505		N/A	\$	N/A
	Regulation A		N/A	s	N/A
	Rule 504	_	N/A	\$	N/A
	Total	_	N/A	\$	N/A
	Total	_	NA	J	1978
tl tl	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of the expenditure is not known, furnish an estimate and check the box to the left of the estimate.				
	Transfer Agent's Fees			\$	0
	Printing and Engraving Costs			\$	0
	Legal Fees		Ø	\$	9,099
	Accounting Fees.			\$	0
	Engineering Fees			\$	0
	Sales Commissions (specify finders' fees separately)			\$	0
	Other Expenses (identify)			\$	0
	Total		Ø	\$	9,099

	C. OFFERING PRICE, I	NUMBER OF INVESTORS, EX	PENS	ES A	ND USE OF P	ROCE	EDS	
	<ul> <li>b. Enter the difference between the aggregation 1 and total expenses furnished difference is the "adjusted gross proceeds to</li> </ul>	in response to Part C - Question 4.	a. Th	is		\$_		22,990,901
5.	Indicate below the amount of the adjusted to be used for each of the purposes shown. furnish an estimate and check the box to payments listed must equal the adjusted groto Part C - Question 4.b. above.	If the amount for any purpose is not the left of the estimate. The total	knows of th	n, ie				
					Payments to Officers, Directors, & Affiliates			Payments To Others
	Salaries and Fees			\$_	0		\$_	0
	Purchase of real estate			\$_	0		\$_	0
	Purchase, rental or leasing and installation	of machinery and equipment		\$_	0		\$_	0
	Construction or leasing of plant buildings a	nd facilities		\$_	0		\$_	0
	Acquisition of other businesses (including this offering that may be used in exchar another issuer pursuant to a merger)	nge for the assets or securities of		\$	0		\$	0
	Repayment of indebtedness			s –	<u> </u>		\$ _ \$	0
	Working capital			s –			\$ -	0
	Other (specify): Investment Capital			<u> </u>	0	 ☑	\$ \$	22,990,901
	Column Totals			* - \$	-	- <u>~</u> ☑	\$ - \$	22,990,901
	Total Payments Listed (column totals added	1)			Ø \$	22,9	90,90	)1
		D. FEDERAL SIGNATU	RE					
fc	he issuer has duly caused this notice to be sellowing signature constitutes an undertaking its staff, the information furnished by the issue	g by the issuer to furnish to the U.S. S	ecuriti	es an	d Exchange Comn	nission,	upon	
ssu	er (Print or Type)	Signature			Date /			<del></del>
Gol	dman Sachs Select Fund, Ltd.	Xat ween	_		May <u>) 5</u> , 2007			
lar	ne of Signer (Print or Type)	Title of Signer (Print or Type)						
€at	hryn Pruess	Vice President of the Issuer's Inves	tment	Man	ager			

ATTENTION

Kathryn Pruess

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001).